

Name IAN L. Jefferson
 Prison Number 14771-006
 Mailing Address, Zip/Place of Confinement
FCI Marianna P.O. box 7007
Marianna FL 32447

RECEIVED

FEB 12 2007

CLERK, U.S. DISTRICT COURT
 UNITED STATES DISTRICT COURT ANCHORAGE, ALASKA
 FOR THE DISTRICT OF ALASKA

United States of America

Plaintiff,

vs.

Ian L. Jefferson

Defendant(s).

PRISONER'S
 DECLARATION AND APPLICATION
 TO PROCEED IN FORMA PAUPERIS

CASE NO. 4:05-cr-00028 RRB
 (To be supplied by the Court)

I, Ian Louis Jefferson, declare that I am the (check the appropriate box)

- ☐ Plaintiff (filing 42 U.S.C. § 1983)
☐ Petitioner (writ of habeas corpus
 28 U.S.C. §§ 2254 or 2241)

- ☒ Movant (filing 28 U.S.C. § 2255 motion)
☐ Other _____

in this case. I am unable to prepay the fees for this proceeding or give security because of my poverty, and I believe I am entitled to the relief I am requesting. I acknowledge and consent that a portion of any recovery, as directed by the Court, will be paid to the Clerk of Court for reimbursement of all fees incurred by me as a result of being granted leave to proceed *in forma pauperis*.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" DO NOT USE THIS FORM)

If "Yes" state the place of your incarceration: FCI Marianna (Florida)

IMPORTANT: Have the Department of Corrections fill out the Certification and Calculation portion of this application and attach a certified copy of your prison trust account statement showing transactions for the past six months.

2. Are you currently employed? ☐ Yes ☒ No

If the answer is "Yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer to No. 2 is "No," state the date of last employment and the amount of the gross and net salary and wages per month which you received.

Gross: \$1200.00 monthly Net: _____

Employer: Ivory Tacks Restaurant

Date of Last Employment: 4 122 104 (month/day/year)

3. In the past twelve months have you received any money from any of the following sources?

- | | | |
|---------------------------------------------------|-----------------------------------------|----------------------------------------|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest, dividends or PFDs | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or worker's compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "Yes," describe each source and state the amount and when received and what you expect you will continue to receive. Attach additional sheets if necessary.

My girl friend sends me fifty dollars a month and so does my mother

4. Do you have any cash? ☒ Yes ☒ No
State the total amount and location: I have \$1.00 in my prison account there at Marianna

5. Do you have any checking account(s)? ☐ Yes ☒ No

a. Name(s) and address(es) of bank(s): _____

b. Present balance(s) in account(s): _____

6. Do you have any savings/IRA/money market/CDs' separate from checking accounts?

☐ Yes ☒ No

a. Name(s) and address(es) of bank(s): _____

b. Present balance(s) in account(s): _____

7. Do you own an automobile or other motor vehicle? ☐ Yes ☒ No

a. Make: _____ Year: _____ Model: _____

b. Is it financed? ☐ Yes ☐ No

c. If so, what is the amount owed? _____

8. Do you own any real estate, stocks, bonds, securities, other financial instruments or other valuable property? ☐ Yes ☒ No

If "Yes" describe the property and state its value: _____

9. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support: _____

IAW L. Jefferson JR / Te'ia D. Jefferson-Tisdell / Father

10. Do you have any other assets or personal property other than clothing? ☐ Yes ☒ No

If "Yes" list the asset(s) and state the value of each asset listed: _____

11. Have you placed any property, assets or money in the name or custody of anyone else in the last two years? ☐ Yes ☒ No

If the answer is "Yes," give the date, describe the property, assets or money, give the name of the person given custody of the item and the reason for the transfer: _____

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury under the laws of the United States of America that the above information is true and correct.

Executed on: 1/31/07
DATE

Jon Z. [Signature]
SIGNATURE OF APPLICANT

AUTHORIZATION

I, IAN L. Jefferson, request and authorize the agency holding me in custody to prepare for the Clerk of the United States District Court for the District of Alaska, a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) activity at the institution where I am incarcerated.

I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust fund account (or institutional equivalent) pursuant to any future orders issued by the Court relating to this civil action in accordance with 28 U.S.C. § 1915(b).

1/31/07

DATE

Ian L. Jefferson

SIGNATURE OF APPLICANT

IAN L. Jefferson

COMMITTED NAME OF APPLICANT

(Type or Print)

14771-006

INMATE NO.

CERTIFICATION AND CALCULATION

(To be completed by the Department of Corrections)

I certify that the applicant named herein has the (available) sum of \$ — 0 — on account to his/her credit at \$ 1,331.50 LAST SIX MONTHS (name of institution).

I further certify that during the past six months the applicant's average monthly balance was \$ 121.81.

I further certify that during the past six months the average monthly deposits to the applicant's account was \$ 121.81.

Please attach certified copy of applicant's account statement showing transactions for past six months.

2/2/07

DATE

M. Davis, Correctional Counselor

SIGNATURE OF AUTHORIZED OFFICER

(850)526-2313

TITLE and NAME OF AGENCY